

**ROMANO & ROMANO, ESQS.**

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**Attorney for Guilderland Center Rehabilitation and Extended Care Facility**

**In the matter of:**

**ANDREW A. WILLIAMS  
YOLANDA SHEFFIELD WILLIAMS**

**Debtor,**

**US BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY**

**CASE NO. 19-10071 (VFP)**

**CERTIFICATION IN OPPOSITION TO  
DEBTOR'S OBJECTION TO  
UNSECURED CLAIM**


I, Michele Weber, of full age, by way of Certification in lieu of Affidavit, say:

1. From date of admission to the date of his death, the resident, Larry A. Sheffield, (hereinafter referred to as "Larry") was a resident of plaintiff rehabilitation and care center and received the benefits without making payment for the same.
2. On information and belief, Larry died on June 18, 2017.
3. On information and belief, at all times mentioned herein, defendants, Gretchen Sheffield (hereinafter referred to as "Gretchen") and Yolanda Sheffield a/k/a Yolanda Williams (hereinafter referred to as "Yolanda") held a Power of Attorney for Larry.
4. As Power of Attorney for Larry, the defendants, Gretchen and Yolanda, had access to and control over Larry's assets.

5. On information and belief, the defendants, Gretchen and Yolanda, abused their Power of Attorney by converting Larry's assets into his/her own in lieu of paying the plaintiff for services and/or treatment rendered to Larry.
6. As Power of Attorney for Larry, the defendants, Gretchen and Yolanda, had a fiduciary duty to ensure that Larry's Medicaid Application was approved, Larry's social security benefits were turned over to the Plaintiff, and Larry's assets were used to pay the plaintiff for the services and/or treatment rendered.
7. On information and belief, the defendants, Gretchen and Yolanda breached their fiduciary duty to Larry and plaintiff herein by failing to comply with Medicaid Rules and Regulations and have Larry approved for Medicaid.
8. On information and belief, the defendants Gretchen and Yolanda, breached their fiduciary duty to Larry and plaintiff herein by failing to use Larry's assets to pay for the services and/or treatment rendered by plaintiff.
9. On information and belief, the defendants, Gretchen and Yolanda, breached their fiduciary duty to Larry and plaintiff herein by failing to ensure Larry's social security benefits and/or pension were remitted to the plaintiff, as set forth on the bill which is attached marked Exhibit "A".
10. As a result of the defendants', Gretchen and Yolanda, breach of fiduciary duty, the plaintiff has suffered damages.
11. Demand has been made. The balance which is now due from the Defendants to the Plaintiff is \$35,918.00.

I certify that the above statements made by me are true. I am aware that if any of the above statements made by me are willfully false, I am subject to punishment.

March 14, 2019

  
Michele Weber

**GUILDERLAND CENTER REHABILITATION AND EXTENDED CARE FACILITY**

428 New York State Highway 146

Altamont NY 12009-4409

518-881-5141

Amount Due	Due By	Statement Date
35,918.00	05/01/17	05/29/17

GRETCHEN SHEFFIELD

108 BLOOMFIELD AVE

UNIT 410

BLOOMFIELD, NJ 07003

Resident: **Sheffield, Larry**

ID: 10882

Date	Description	Period	Days/ Units	Rate	Charge	Credit	Balance
09/30/16	Patient Liability/Social Security	09/2016			3,638.90		3,638.90
10/31/16	Patient Liability/Social Security	10/2016			3,638.90		7,277.80
11/01/16	Patient Liability/Social Security	11/2016			3,638.90		10,916.70
11/30/16	Patient Liability/Social Security	07/2016			3,638.90		14,555.60
11/30/16	Patient Liability/Social Security	08/2016			3,638.90		18,194.50
12/01/16	Patient Liability/Social Security	12/2016			3,638.90		21,833.40
01/01/17	Patient Liability/Social Security	01/2017			3,638.90		25,472.30
02/01/17	Patient Liability/Social Security	02/2017			3,638.90		29,111.20
02/08/17	Payment					1,937.20	27,174.00
03/01/17	Patient Liability/Social security	03/2017			3,638.90		30,812.90
03/08/17	Payment					1,937.20	28,875.70
04/01/17	Patient Liability/Social Security	04/01/17- / /			3,638.90		32,514.60
04/12/17	Payment					1,937.20	30,577.40
05/01/17	Patient Liability/Social Security	05/2017			3,638.90		34,216.30
05/10/17	Payment					1,937.20	32,279.10
05/01/17	Patient Liability/Social Security	05/01/17- / /			3,638.90		35,918.00
Payment is Due by 05/01/17						Total Due:	35,918.00